GENERAL FACT SHEET

07-129

BILL NUMBER

BRIEF TITLE
Environmental Public Health
Permit Fee Increases

APPROVAL DEADLINE

REASON

To provide adequate revenue to meet City

Council approved budget.

DETAILS	POSITIONS/RECOMMENDATIONS						
Increase and create fees specified in: - LMC 8.06 Air Pollution - LMC 8.08 Body Art	Sponsor	Board of Health					
- LMC 8.12 Small Family Child Care Homes - LMC 8.14 Child Care Programs - LMC 8.20 Lincoln Food Code - LMC 8.24 Noise Control Ordinance - LMC 8.38 Public Swimming Pools - LMC 8.40 Spa Facilities - LMC 8.44 Water Wells	Program Departments, or Groups Affected	All automated departments Various Programs Environmental Public Health Regulated industry, businesses and entities					
	Applicants/ Proponents	Applicant					
- LIMO 0.44 Water Wens		Health Department					
		City Department					
		Health					
		Other Board of Health					
Discussion (Including Relationship to other Council	Opponents	Groups or Individuals					
Actions) The Council budget incorporates revenue to be		None specifically identified					
generated through fee increases as part of the Health Department budget. Proposed changes to permit fees address increased operational costs. These fee increases will assure the Health Department meets its revenue requirements for FY 08.		Basis of Opposition					
	Staff Recommendations	⊠ For □ Against Reason Against					
	Board or Commission Recommendation	BY: Board of Health ☑ For ☐ Against ☐ No Action Taken ☐ For with revisions or conditions (See Details column for conditions)					
	CITY COUNCIL ACTIONS (For Council Use Only)	□ Pass □ Pass (As Amended) □ Council Sub. □ Without Recommendation □ Hold □ Do not Pass					

<u> VETAILO</u>	PULICY/PROGRAM IMPACT						
	POLICY OR PROGRAM CHANGE						
	OPERATIONAL IMPACT ASSESSMENT	Fee increases are necessary to maintain regulatory program functions mandated by Lincoln Municipal Code.					
	FINANCES						
	COST AND REVENUE PROJECTIONS	COST of total project: \$ 0 COST of this Ordinance/ Resolution \$ 0					
		RELATED annual operating Costs \$0					
		INCREASE REVENUE EXPECTED/YEAR \$30,000					
	SOURCE OF FUNDS	CITY [Approximately] \$ % \$ % \$ % NON CITY [Approximately] Fees \$ 30.000 %100 \$ %					
	200 Em & 1 Dm 200 Fresh / Or And Co Info	\$%					
	BENEFIT COST ☐ Front Foot ☐ Square Foot	Average Assessment \$\$					

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FACT SHEET PREPARED BY: Scott E. Holmes, Environmental Public Health Division Manager

REVIEW BY:

REFERENCE NUMBER